Name in Full

Thomas Nelson Adams

Certificate of Death

Town

County Frederick

Died at

MARYLAND

Month	Day		Y.	M.	D.	Native of	Occupation
Date 189 8	10	5	Age x	2	5	Md	x

Male ~~Female~~ White ~~Colored~~ Married Single Widow Widower Divorced Number of children living 1

Husband of Wife x

Father's Name Lewis B Adams

Mother's Name Daisy E. Grimes

Cause of Death: Primary Enteric Colitis 83

Immediate Pneumonia

How long sick

Accident, Suicide, Homicide

Reported by Chas F Fowler MD

Address Frederick Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full George Angleberger

Certificate of Death

Died at Town Charlestown, County Frederick, Co., MARYLAND

Date 189 8 Month Oct. Day 27 | Age Y. 75 M. 11 D. | Native of Maryland | Occupation Farmer

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~

Number of children living 6

Husband / Wife of Elisabeth Wachter

Father's Name George Angleberger, Mother's Name Margaret Devilbiss

Cause of Death: Primary Paralysis — How long sick 3 days

Immediate Asthenia 44 — Accident, Suicide, Homicide

Reported by S. F. Hoffman M. D.

Address Frederick Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Louis Artzberger

Certificate of Death

Died at Town Fairfield County Frederick MARYLAND

Date 189 8 Month 10 Day 20 Age Y. 78 M. D. 19 Native of Occupation

Male ~~Female~~ White ~~Colored~~ Married Single Widow Widower Divorced Number of children living

Husband of Wife

Father's Name Mother's Name

Cause of Death Primary Paralysis 44 How long sick

Immediate Accident, Suicide, Homicide

Reported by Banner of Liberty Libertytown

Address 11-3

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Anna L Barnes

Died at Town Oak Orchard County Frederick MARYLAND

Date 1898 Month Oct Day 31 Age Y. 49 M. D. Native of Md Occupation wife

~~Male~~ Female Whita ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living 5

~~Husband~~ Wife of William P Barnes

Father's Name William Mitten Mother's Name Mary A Lambert

Cause of Death Primary Chronic Bronchitis 70 How long sick 3 years

Immediate Exhaustion ~~Accident, Suicide~~, Homicide

Reported by B. G. Franklin

Address Marston Carroll Co

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 25968

Name in Full: Jessie Mabel Beard

Certificate of Death

Died at: Town: Edin County: ~~[illegible]~~ Fredk. MARYLAND

Date 1898 Month 10 Day 3 | Age Y. 7 M. 19 D. | Native of | Occupation

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number of children~~ living

Husband / Wife of

Father's Name: Jesse Beard

Mother's Name: Nettie

Cause of Death: Primary: Brain fever 39a

Immediate

How long sick

Accident, Suicide, Homicide

Reported by: Independent Hampstead

Address: 10-7

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65868

Rev. S. H. Diehl,
St. John's, Leister's
Addressed Oct. 14

Name in Full Lewis H Bennett — Certificate of Death

Died at Town Frederick County Frederick MARYLAND

Date 1898 Month Oct Day 28 — Age Y. 80. M. 70. D. — Native of Frederick — Occupation Wheelwright

Male ~~Female~~ — White ~~Colored~~ — ~~Married~~ ~~Single~~ ~~Widow~~ Widower ~~Divorced~~ — Number of children living 6

Husband ~~Wife~~ of Mrs — Bennett

Father's Name — Mother's Name

Cause of Death — Primary Old age 141 — How long sick

Immediate Cardiac Paralysis — ~~Accident, Suicide, Homicide~~

Reported by Talbert M.D.

Address 17 E 2nd St.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

~~Interment~~

Interment - Mt. Olivet -

Oct - 31 1898.

C C Carey F.D.

Name in Full — Certificate of Death

Lawrence Benz

Died at Town: Frederick — County: Frederick — State: MARYLAND

Date 189 — Month: Oct — Day: 22. — Age: Y. 73. M. 11. D. — Native of: Switzerland — Occupation: Farmer

Male: Yes — White: Yes — Married: Yes. — Widow: — — Divorced: —

Female — Colored — Single — Widower — Number of children living

Husband of / Wife

Father's Name: Unknown — 57 — Mother's Name: Unknown

Cause of Death — Primary: Cardiac Kidney Disease & Cirrhosis of Liver. — How long sick: 2 weeks under my care

Immediate: Physical Exhaustion & Heart-failure — Accident, Suicide, Homicide

Reported by: [illegible]

Address: Frederick Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, FORM

Name in Full Henry Brown

Certificate of Death

Died at near Knoxville Town Frederick County MARYLAND

Date 1895 Month Oct Day 26 tuesday Age Y. 86 M. D. Native of Md Occupation Laborer

Male ~~White~~ Married ~~Widow~~ ~~Divorced~~

~~Female~~ Colored ~~Single~~ Widower Number of children living two

Husband ~~Wife~~ of Lorina Brown

Father's Name Mother's Name

Cause of Death Primary old age 141 How long sick six weeks

Immediate " " Accident, Suicide, Homicide

Reported by C. H. Feet & Bro.

Address Burnsville Md

OVER

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Attended by Dr. Not in attendance

of

Seen by Coroner

of

Information contained in this certificate received from Robert Barton

of Knoxville Tenn

son of deceased

Name in Full

Certificate of Death

Daniel Burger

Died at Town Walkersville County Frederick MARYLAND

Date 189 8 Month 10-27 Day Age 89 Y. M. D. Native of Occupation Retired Farmer

Male White Married Widow Divorced

~~Female~~ ~~Colored~~ ~~Single~~ Widower Number of children living 2

Husband of
Wife

Father's Name

Mother's Name 153

Cause of Death { Primary General debility How long sick

Immediate Accident, Suicide, Homicide

Reported by Banner & Library Library town

Address 11-2

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full | Certificate of Death

Isaiah Butts

Died at Town near Middletown County Frederick MARYLAND

Date 1898 Month 10 Day 2 Age Y. 64 M. D. | Native of | Occupation

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ Widow Widower Divorced Number of children living

Husband of Wife

Father's Name | Mother's Name

Cause of Death: Primary Heart trouble '57 | How long sick

Immediate | Accident, Suicide, Homicide

Reported by Banner of Liberty 10-6

Address Libertytown

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65969

Name in Full Charlotte Carter

Certificate of Death

Died at Town Frederick County Frederick MARYLAND

Date 189 8 Month oct Day 23 | Age Y. 87 M. × D. × | Native of Maryland | Occupation H.K

~~Male~~ Female | ~~White~~ Colored | ~~Married~~ ~~Single~~ Widow ~~Widower~~ | ~~Divorced~~ | Number of children living 6

~~Husband~~ Wife of Daniel Carter

Father's Name × × Mother's Name × × ×

Cause of Death: Primary Bright's Disease 97 | How long sick 2 years

Immediate Uraemic Convulsions | ~~Accident, Suicide, Homicide~~

Reported by Dr. A Long MD

Address 46 E. Patrick St City

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Allie Clay-

Certificate of Death

Died at Town Bartholows, County Frederick MARYLAND

Date 1898 Month 10 Day 26 | Age Y. 24 M. D. | Native of Md. | Occupation House wife

~~Male~~ Female | White | ~~Colored~~ | Married | ~~Single~~ | ~~Widow~~ Widower | ~~Divorced~~

Number of children living 4

~~Husband~~ Wife of Joseph W. Clay.

Father's Name Neil Runkles. Mother's Name Runkles

Cause of Death: Primary Pneumonia, Immediate Heart failure.

How long sick One week, [redacted]

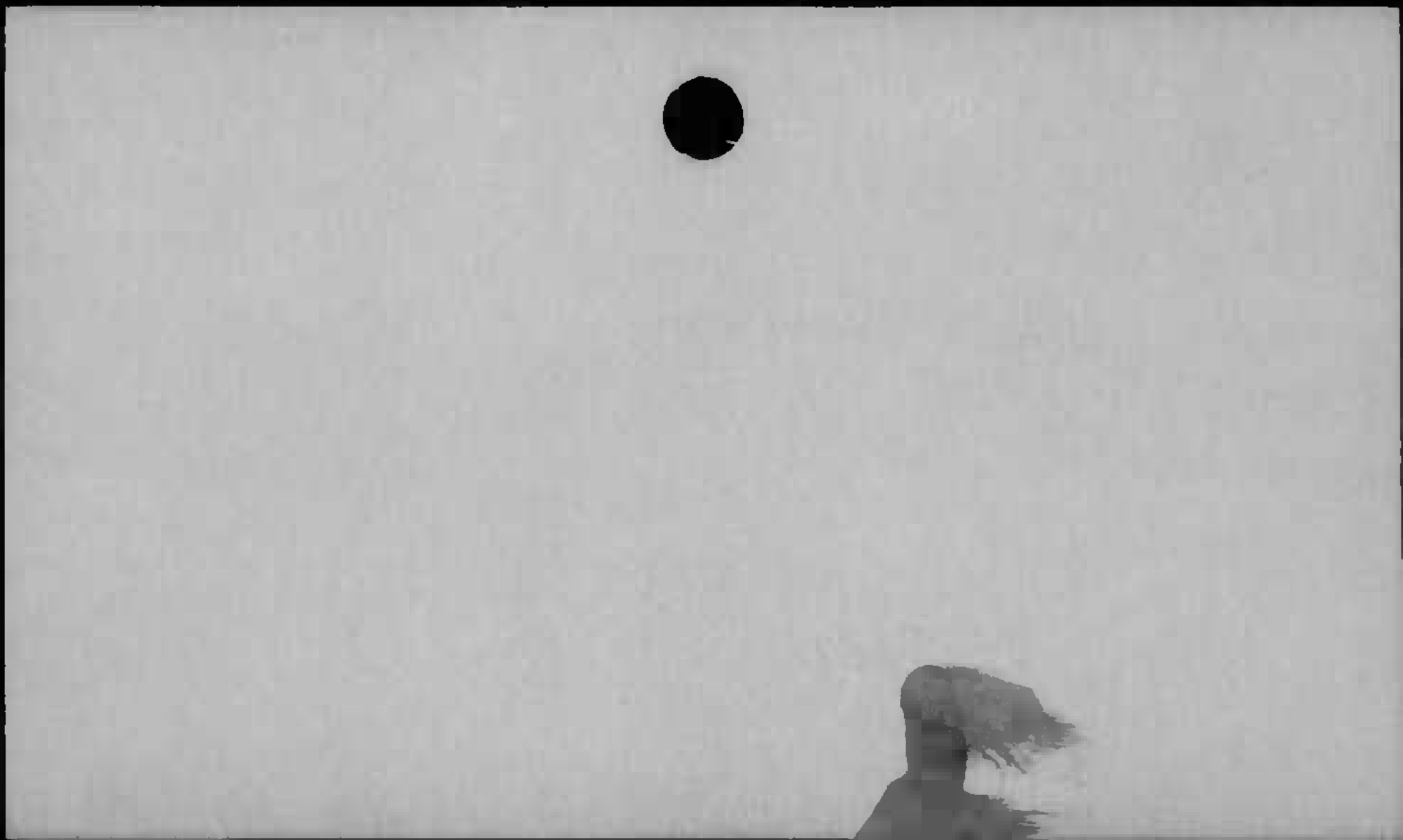
~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by J W Downey M.D.

Address Frw Market [redacted] Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65868



Name in Full Ellen Cooper

Certificate of Death

Died at Town Frederick County Frederick MARYLAND

Date 1898 Month Oct Day 24 Age Y. 70+ M. D. Native of Frederick Occupation

~~Male~~ Female ~~White~~ Colored Married Single Widow ~~Widower~~ Divorced Number of children living

Husband of Wife

Father's Name

Mother's Name 141

Cause of Death Primary Senile Debility How long sick

Immediate Asthenia Accident, Suicide, Homicide

Reported by Jo McCurdy

Address 12 W Pat St

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

C. Harmon Culler

Died at Town: Jefferson County: Frederick MARYLAND

Date 189 8 Month: Oct Day: 7 | Age Y. 61 M. D. | Native of | Occupation

Male ~~Female~~ | White Colored | Married Single | Widow Widower | Divorced | Number of children living 5

Husband of Wife

Father's Name

Mother's Name

Cause of Death — Primary: Heart trouble 5-7 | How long sick

Immediate | Accident, Suicide, Homicide

Reported by Barnes & Libhart. Oct 13th

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Chas. F. Eutsail

Certificate of Death

Town Frederick County Frederick MARYLAND

Died at near Frederick

Date 189 5 Month 10-28 Day Age Y. 17 M. 2 D. 1

Native of Occupation

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

Husband of Wife

Father's Name Wm. S. Eutsail Mother's Name 161

Cause of Death { Primary Complications / diseases How long sick

Immediate

Accident, Suicide, Homicide

Reported by Banner & Libby Littlestown

Address 10-29

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, FORM

Name in Full [illegible] Swilhier Certificate of Death

[illegible]

Town [illegible] County [illegible]

Died at [illegible] MARYLAND

Month	Day	Y.	M.	D.	Native of	Occupation
Date 189 [illegible]	[illegible]	Age 31	1	30	[illegible]	[illegible]

Male [illegible] White [illegible] Married [illegible] Widow [illegible] Divorced —

Female Colored Single Widower Number of children living 2

Husband of [illegible] Wife

Father's Name [illegible] Mother's Name [illegible]

Cause of Death: Primary [illegible] 22 c. How long sick [illegible]

Immediate [illegible] Accident, Suicide, Homicide

Reported by [illegible]

Address [illegible]

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 6596R

Attended by Dr. R. L. Hammond

of Woodsboro

Information contained in this certificate re-
ceived from R. L. Hammond

of Woodsboro

Name in Full: Annie Maria Esterly

Certificate of Death

Died at Town: Frederick, County: Frederick

MARYLAND

Date 1898 Month 10 Day 4 | Age Y. 75 M. 2 D. 12 | Native of Germany | Occupation Housewife

~~Male~~ White ~~Married~~ Widow ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 5

~~Husband~~ Wife of Frederick Esterly

Father's Name: Peter Ross

Mother's Name: Ann Maria Beyerlein

Cause of Death: Primary: Paralysis 44 | How long sick: seven weeks

Immediate: Asthenia | ~~Accident, Suicide, Homicide~~

Reported by: S. T. Haffner M. D.

Address: Frederick Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name in Full Joseph H. Etzler

Certificate of Death

Died at Town Liberty County Frederick MARYLAND

Date 1895 Month Oct Day 16 Age Y. 72. M. 6. D. 16 Native of Liberty town Occupation Merchant

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single Widow Widower No Divorced Number of children living Four

Husband of Wife

Father's Name

Mother's Name

Cause of Death Primary Enlarged Prostate 104 How long sick 2 weeks

Immediate Cystitis Accident, Suicide, Homicide

Reported by O. B. Stone M. D.

OVER

Address Liberty town Maryland.

Must be signed by physician, if any in attendance, otherwise [illegible] proner, undertaker or minister.

LIBRARY BUREAU. 78708

Attended by Dr. O. B. Stone
of Libertytown Ind.

The undertaker was Sweadner Bros.
of Libertytown Ind.

Information contained in this certificate was received from Sweadner Bros
of Libertytown Ind.

Name in Full

Certificate of Death

Austin Exline

Died at Town Hancock County Frederick MARYLAND

Date 189 Month Oct Day 8 | Age Y. M. D. Native of Occupation teacher

Male White Married Widow Divorced

Female Colored Single Widower Number of children living

Husband of Wife

Father's Name Joseph Exline

Mother's Name

Cause of Death { Primary Cerebro Spinal Meningitis How long sick

Immediate

Accident, Suicide, Homicide

599

Reported by Sun Oct 31

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 58968

Name in Full — Certificate of Death

Mrs. Margaret R. Eyler

Died at — Town: Ladiesburg — County: Fredrick — MARYLAND

Date 1898 — Month: Oct. — Day: 31 — Age: Y. 78 M. 4 D. 17 — Native of: Md. — Occupation:

Male / Female 1 — White 1 / Colored — Married 1 / Single — Widow 1 / Widower — Divorced / Number of children living: Dist Kiwa

Husband / Wife of

Father's Name — Mother's Name 141

Cause of Death — Primary: Old Age — How long sick

Immediate: Heart Failure — Accident, Suicide, Homicide

Reported by: Rev. R. B. Patterson

Address: Woodsboro — Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Attended by Dr. _____

of _____

The undertaker was Mr. Kolb

of Double Pipe Creek, Md.

Information contained in this certificate received from _____

of _____

Name in Full — Certificate of Death

Bettie Fairfax

Died at Liberty Town — County Frederick — MARYLAND

Date 1898 — Month 10 — Day 8 | Age Y. 27 M. 5 D. 17 | Native of Liberty | Occupation Cook

~~Male~~ Female | ~~White~~ Colored | ~~Married~~ Single | ~~Widow~~ Widower | ~~Divorced~~ Number of children living

Husband / Wife of

Father's Name Zacharias Fairfax | Mother's Name Sophia Fairfax

Cause of Death: Primary Acute Phthisis 22a | How long sick 3 months

Immediate Asthenia | Accident, Suicide, Homicide

Reported by O.B. Stone M.D.

Address Liberty Town Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Name in Full

Certificate of Death

Philmore Reson Fisher

Died at Town Old Fields County Frederick — State MARYLAND

Date 1898 Month Oct. Day 16 | Age about Y. 48 M. not known D. | Native of Fredk. Co. | Occupation none

Male ~~White~~ ~~Married~~ ~~Widow~~ Divorced

~~Female~~ Colored Single Widower ~~Number of children~~ living 2

~~Husband~~ ~~Wife~~ of

Father's Name Ellegitimate

Mother's Name Elizabeth Fisher

Cause of Death: Primary Phthisis Pulmonalis — How long sick 2 or 3 years

Immediate Exaustion 22a

~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by Thomas P. Sappington M.D

Address Unionville Fredk. C. Md.

This was an Idiot

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Name in Full Mrs Clara V. Gebendauer

Certificate of Death

Died at Town Frederick County Frederick MARYLAND

Date 189 8 Month Day Oct 22 Age Y. M. D. 50+ Native of Md Occupation Housewife

~~Male~~ Female White ~~Colored~~ Married ~~Single~~ Widow Widower Divorced Number of children living 6

~~Husband~~ Wife of Eugene Gebendauer

Father's Name Mother's Name 57

Cause of Death Primary Organic Heart Disease How long sick 6 mos

Immediate Cardiac Paralysis Accident, Suicide, Homicide

Reported by Jo J McCurdy

Address 12 W. Cat St.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Emory M. Gibson

Certificate of Death

Died at Town Fred'k County Fred'k MARYLAND

Date 189 8 Month 10 Day 10 Age Y. 32 M. 4 D. Native of Fred'k Occupation Electrician

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ Widow Widower Divorced Number of children living

Husband of Wife

Father's Name

Mother's Name

Cause of Death Primary Tuberculosis

Immediate Exhaustion

22.9

How long sick One Year.

Accident, Suicide, Homicide

Reported by W. G. McCann

Address Frederick Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Mary Diggs Governour

Certificate of Death

Died Near Town Petersville County Frederick MARYLAND

Date 189 8 Month Oct Day 4 | Age Y. 88 M. 4 D. | Native of Md. | Occupation Housework

~~Male~~ White Married Widow ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living none

Husband / Wife of Samuel L Governour

Father's Name Wm Lee Mother's Name Mary Holiday

Cause of Death: Primary Fraction of Tumor 143 | How long sick 1 month

Immediate Exhaustion from Shock and Confinement | Accident, ~~Suicide, Homicide~~

Reported by Levin West. M. D.

Address Brunswick Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Town — County

Died at MARYLAND

Date 189 Month Day | Age Y. M. D. | Native of | Occupation

Male White Married Widow Divorced

Female Colored Single Widower Number of children living

Husband of

Wife

Father's Name

Mother's Name

Cause of Death: Primary

Immediate

How long sick

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65988

Attended by Dr. [illegible]

of [illegible]

Information contained in this certificate received from [illegible]

of [illegible]

Name in Full | Certificate of Death

Francis Washington Haines

Died at Town: Unionville County: Frederick — MARYLAND

Date 1898 Month: October Day: 7 | Age Y. 69 M. 0 D. 4 | Native of: Fredk. Co. | Occupation: Farmer

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living two

Husband ~~Wife~~ of Elizabeth M. Lambert

Father's Name John Haines | Mother's Name ~~Anne Haines~~ Not known

Cause of Death: Primary Apoplexy 42 | How long sick about 24 hours

Immediate | Accident, ~~Suicide, Homicide~~

Reported by Thomas P. Sappington M.D.

Address Unionville Fredk. Co. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Name in Full Elizabeth Herring

Certificate of Death

Died at Town Fred K Md County Frick Co MARYLAND

Date 189 8 Month Oct Day 17 Age Y. X M. X D. 8 Native of Occupation

Male White Married Widow Divorced

Female Colored Single Widower Number of children living

Husband of Wife

Father's Name Mother's Name 161

Cause of Death Primary Causes not known dead not

Immediate see child until after death

How long sick

Accident, Suicide, Homicide

Reported by W. G. McCamas

Address Frederick Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Charles Grafton Hill

Died at Old Fields (Town) Frederick (County) _____ MARYLAND

Date 189 8 Month Oct. Day 9 | 23 Y. ~~M.~~ ~~D.~~ Age | Native of Md. | Occupation Laborer

Male ~~Female~~ | ~~White~~ Colored | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | Divorced | Number ~~of children~~ living 3

Husband of Wife

Father's Name Andrew Hill | Mother's Name Elizabeth Fisher

Cause of Death: Primary Typhoid fever | How long sick 10 days

Immediate Intestinal hemorrhage | Accident, Sulcide, Homicide

Reported by Thomas P. Sebrington Jr. M.D.

Address Unionville Fredk. Co. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Name in Full

Certificate of Death

Catherine Hoy

Died at near Town Unionville County Frederick MARYLAND

Date 189[illegible] Month 10 Day 21 Age Y. M. D. Native of Occupation Housewife

~~Male~~ Female ~~White~~ Colored Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~

Number of children living

~~Husband~~ Wife of Peter Hoy

Father's Name

Mother's Name

Cause of Death { Primary Typhoid Fever

Immediate

How long sick

Accident, Suicide, Homicide

Reported by Banner of Liberty 10-6

Address Libertytown

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 85968

Rev. J. A. Williams – colord – Fairview.

Letter Nov 16
returned; not found

Name in Full — Certificate of Death

Mrs Annie C. Huffer.

Died at — Town: Broadrun — County: Frederick — MARYLAND

Date 1898 — Month: Oct — Day: 31 — Age: Y. 66. M. 11 D. 16 — Native of: Maryland — Occupation: Farmer Wife.

~~Male~~ White Married ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 5.

~~Husband~~ Wife of David Huffer.

Father's Name: Jacob Ahalt — Mother's Name: Mary Ahalt

Cause of Death — Primary: Acute Gastritis & Enteritis. — How long sick: One week

Immediate: 83 — Accident, Suicide, Homicide

Reported by: E. W. Schultneck

Address: Burkittsville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Name in Full George Johnson

Certificate of Death

Died at Town Frederick County Frederick MARYLAND

Date 1898 Month Oct Day 25th Age Y. 29 M. D. Native of Frederick Occupation

Male / Female ~~Female~~ White / ~~Colored~~ Married / ~~Single~~ Widow Widower Divorced Number of children living

Husband of Wife

Father's Name Mother's Name 26

Cause of Death: Primary Acute Rheumatism — How long sick

Immediate Cardiac Paralysis — Accident, Suicide, Homicide

Reported by Dr. J. McCurdy

Address 12 N. Bentz.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Sara J. Johnson

Died at near Town Middleburg County Frederick MARYLAND

Date 189 8 Month 10 Day 17 | Age Y. 69 M. 7 D. 14 | Native of | Occupation

~~Male~~ Female | White ~~Colored~~ | Married ~~Single~~ | Widow Widower | Divorced Number of children living

~~Husband~~ Wife of Samuel Johnson

Father's Name | Mother's Name

Cause of Death: Primary 161 | How long sick

Immediate | Accident, Suicide, Homicide

Reported by Banner of Liberty 11-10

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Name in Full

Earl King

Certificate of Death

Died at Town Frederick County Frederick MARYLAND

Date 1898 Month 10 Day 28 Age Y. x M. 8 D. " Native of Md. Occupation x

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living 4

Husband of Wife x

Father's Name Wm H King Mother's Name Eb. King

Cause of Death Primary Membr Croup — How long sick 4 days —

Immediate Cyanosis — Accident, Suicide, Homicide

Reported by Franklin Buchanan Jr

Address Frederick Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Thomas Lafayette

Certificate of Death

Died at near Town Middlepoint County Frederick MARYLAND

Date 189 8 Month 10 Day 11 | Age Y. 73 M. D. | Native of | Occupation

Male ~~Female~~ | White ~~Colored~~ | Married Single | Widow Widower | Divorced Number of children living

Husband of Wife

Father's Name

Mother's Name

Cause of Death: Primary 161

Immediate

How long sick

Accident, Suicide, Homicide

Reported by Banner of Liberty Libertytown

Address 10-28

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Mary Eleanor Lease

Certificate of Death

Died at Town Pearl County Frederick MARYLAND

Date 189 5 Month 10 Day | Age Y. 6 M. 4 D. 26 | Native of | Occupation

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ Number of children living

Husband of Wife

Father's Name Thos. H. Lease

Mother's Name Jennie Lease

Cause of Death { Primary 161 How long sick

Immediate

Accident, Suicide, Homicide

Reported by Turner J. Libby Libby Town

Address 11-3

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU 68988

Name in Full Elina Lease

Certificate of Death

Died at Town Pearl County Frederick MARYLAND

Date 1898 Month 10 Day 29 Age Y. 6 M. D. Native of Md Occupation

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number~~ of children living

~~Husband of~~

Wife

Father's Name Charles Lease Mother's Name 6 (Ragan)

Cause of Death Primary Scarletina (developing membranous comp) Aphora How long sick 10 days

Immediate ~~Accident, Suicide, Homicide~~

Reported by Dr Wm Crawford Johnson

Address Frederick Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Robert Palmer

Certificate of Death

Died at Town Frederick. County ditto MARYLAND

Date 189 8 Month 10 Day 17 | Age Y. 32 M. x D. x | Native of Md | Occupation Barkeeper

Male ~~Female~~ | ~~White~~ Colored | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ Number ~~of children~~ living

Husband / Wife of +

Father's Name

Mother's Name Jane Palmer

Cause of Death: Primary Phthisis Pulmonalis 226 — How long sick 3 weeks

Immediate Exhaustion — Accident, ~~Suicide~~, ~~Homicide~~

Reported by C. F. Goodell - M.D.

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full — Certificate of Death

Eliza Ann Poffenberger

Died at Town: New Baltimore County: Fred. MARYLAND

Date 1898 Month: 10 Day: 11 Age Y. 82 M. D. Native of: Md Occupation: Housekeeper

Male / Female X — White X / Colored — Married / Single — Widow X / Widower — Divorced / Number of children living 3

Husband / Wife of Jacob Poffinberger dec'd

Father's Name — Wallach Mother's Name

Cause of Death: Primary Cardiac Hyper. 44 — How long sick 4 Days

Immediate Paralysis — Accident, Suicide, Homicide

Reported by Dr. S. S. Davis

Address Boonsboro Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Name in Full

Rankin

Certificate of Death

Died at Town Brunswick County Frederick MARYLAND

Date 189 5 Month Oct Day 11 | Age Y. 20 M. — D. — | Native of Md | Occupation

~~Male~~ Female | ~~White~~ Colored | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ Number of children living None

Husband / Wife of —— (1)

Father's Name Jno. Rankin

Mother's Name Clara Rankin

Cause of Death: Primary Puerperal Convulsions — How long sick 24 hours

Immediate

~~Accident, Suicide, Homicide~~

Reported by Levin "Fleet" 12/

Address Brunswick Md,

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65966

Received Oct 11th 7.30 PM
8 hours of the death

Name in Full M. Rebeca Ray

Certificate of Death

Died at Town Brunswick County Frederick MARYLAND

Date 189 8 Month Oct Day 12 Age Y. 24 M. 8 D. 25 Native of Maryland Occupation None

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband of Wife

Father's Name William Ray

Mother's Name Margarette Elliott

Cause of Death Primary Tubercular Phthisis

Immediate Asthenia

How long sick 3 years

~~Accident Suicide Homicide~~

Reported by A. G. Horne

Address Brunswick Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU

Received Oct 12 - 3.30 PM

Name in Full — Certificate of Death

Betty Harrison Maulsby Ritchie

Died at — Town: Frederick — County: Frederick — MARYLAND

Date 1898 — Month: 10 — Day: 20 — Age: Y. 65 M. D. — Native of: Md — Occupation: ———

~~Male~~ — White — ~~Married~~ — Widow — ~~Divorced~~

Female — ~~Colored~~ — ~~Single~~ — ~~Widower~~ — Number of children living

~~Husband~~ Wife of John Ritchie (deceased)

Father's Name: Wm P. Maulsby — Mother's Name: Nelson

Cause of Death — Primary: Carcinoma (abdominal) 25 — How long sick: in bed four days

Immediate: Heart failure — ~~Accident, Suicide, Homicide~~

Reported by: Dr Wm Crawford Johnson

Address: Frederick Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 85068

Interment
Oct 22d
Mt Olivet
A. F. Rice & Sons

Name in Full | Certificate of Death

Evand Smith

Died at Town: Centerville County: Fredrick Co. Md MARYLAND

Date 1898 Month: Oc Day: 11 | Age Y. 78 M. .. D. .. | Native of: Fredrick Co. | Occupation

Male | White " | Married " | Widow | Divorced

Female " | Colored | Single | Widower | Number of children living

Husband / Wife of living George Smith

Father's Name | Mother's Name 1558

Cause of Death: Primary Heart Trouble | How long sick: sudden death

Immediate " death | Accident, Suicide, Homicide

Reported by P. C. Grossnickle

Address Johnsville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79708

Attended by Dr._____

of_____

Information contained in this certificate re-
ceived from_____

of_____

Name in Full

Certificate of Death

Harriet Stine.

Died at Town Frederick County Frederick MARYLAND

Date 1898 Month Oct Day 31 Age Y. 62. M. X D. X Native of Co. Occupation Domestic

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband of Wife

Father's Name

Mother's Name

22.a.

Cause of Death Primary Rheumatism

Immediate Consumption

How long sick 13 yrs

~~Accident, Suicide, Homicide~~

Reported by A. T. Rice & Son's.

Address 190 N. Market St City.

Must be ~~signed by physician, if any in attendance, otherwise by coroner,~~ undertaker ~~or minister.~~

over.

LIBRARY BUREAU, 66963

Interment at Jefferson

Nov 2d / 1898

A. F. Rice & Son's.

Name in Full Geo W. Stream

Certificate of Death

Died at Town Quarter Branch County Frederick MARYLAND

Date 189 8 Month Oct Day 16 Age Y. 72 M. D. Native of Occupation

Male White Married Widow Divorced

~~Female~~ Colored Single Widower Number of children living

Husband of Wife

Father's Name Mother's Name

Cause of Death Primary 161 How long sick

Immediate Accident, Suicide, Homicide

Reported by Brunswick Herald Oct 26

Address Bru

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Paul Kemp Swomley

Certificate of Death

Died at Town Frederick County Frederick MARYLAND

Date 1898 Month Oct Day 23 | Age Y. 1 M. 6 D. | Native of Maryland | Occupation Infant

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

~~Husband of Wife~~

Father's Name Calvin Swomley Mother's Name Eliza Swomley

Cause of Death { Primary

Immediate Croup Membranous

How long sick 24 hours

~~Accident, Suicide, Homicide~~

Reported by H. A. Long M.D.

Address 45 S. Market Street City

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 63968

Mt Oliver
Oct 24 1898
C C Carty

Name in Full: Maria Talbott

Certificate of Death

Died at: Town: Frederick County: (do) MARYLAND

Date 189 8 - 10 - 24 (Month, Day) Age 63 Y. — M. D. Native of: City Occupation: Laborer

~~Male~~ ~~White~~ Married Widow ~~Divorced~~

Female Colored ~~Single~~ ~~Widower~~ Number of children living

Husband of Wife

Father's Name

Mother's Name

Cause of Death: Primary: Paralysis 44

Immediate

How long sick: One week

~~Accident, Suicide, Homicide~~

Reported by: Hy P Fahrney MD.

Address: Frederick - Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Mary V. Thomas

Certificate of Death

Died at Town: Frederick County: Frederick MARYLAND

Date 1898 Month: 10 Day: 13 Age Y.: 32 M. D. Native of U.S. Occupation

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband / Wife of

Father's Name Wm Thomas

Mother's Name

Cause of Death — Primary: Carcinoma of Stomach — How long sick: several years

Immediate: Anaemia 25 6

~~Accident, Suicide, Homicide~~

Reported by Dr Wm Crawford Thomas

Address Frederick Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Wm. F. Thomas

Certificate of Death

Died at Town Liberty Mill County Frederick MARYLAND

Date 1897 Month 10 Day 30 Age Y. 25 M. D. Native of Occupation Hotter

Male ~~White~~ Married Widow Divorced

~~Female~~ Colored Single Widower Number of children living

Husband of Wife

Father's Name Mother's Name

Cause of Death Primary Meningitis 39a How long sick

Immediate Accident, Suicide, Homicide

Reported by R. H. Beall M.D.

Address Liberty Mill Frederick Co

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79708

Name in Full — Certificate of Death

Joseph Litalie

Town — County

Died at Frederick — Frederick — MARYLAND

Month Day — Y. M. D. — Native of — Occupation

Date 1898 October 22 — Age 8 — Ohio

Male ~~Female~~ — White ~~Colored~~ — ~~Married~~ Single — ~~Widow~~ Widower — Divorced — Number of children living

Husband of Wife

Father's Name Joseph Litalie — Mother's Name 96

Cause of Death — Primary: Acute Bright's Disease — How long sick 3 weeks

Immediate — Accident, Suicide, Homicide

Reported by H. H. Smith

Address 14 East 2d St

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 55D68

Name in Full Mrs Sarah Wachter.

Certificate of Death

Died at Town Frederick County Fred K Co MARYLAND

Date 1898 Month Oct Day 20th Age Y. 75. M. 1. D. 20 Native of Fred K Co Occupation Housewife

~~Male~~ White Married Widow Divorced

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living

Husband of Wife Mrs Kuhn

Father's Name Mother's Name

153

Cause of Death Primary General Debility How long sick

Immediate Exhaustion Accident, Suicide, Homicide

Reported by W. G. McCann

Address Frederick Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

over

LIBRARY BUREAU, 65988

Interment at Bethel
Fredk Co
Oct 23d '89
A. T. Rice & Son's

Name in Full

Certificate of Death

Mary A. Walton

Died at Town Emmitsburg County Frederick MARYLAND

Date 189 5 Month 10 Day 13 Age Y. M. D. | Native of | Occupation

~~Male~~ White Married Widow Divorced

Female ~~Colored~~ ~~Single~~ Widower Number of children living

Husband of Wife

Father's Name

Mother's Name

Cause of Death { Primary Paralysis 44 | How long sick

Immediate | Accident, Suicide, Homicide

Reported by Banner of Liberty Liberty Town

Address 10-24

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Mr. Chas. Whitter

Certificate of Death

Died at Town Doubs County Frederick MARYLAND

Date 189 8 Month 10 Day 21 Age Y. 16 M. D. Native of Occupation

Male White Married Widow Divorced

~~Female~~ Colored Single Widower Number of children living

Husband of Wife

Father's Name

Mother's Name

Cause of Death Primary 161

Immediate

How long sick

Accident, Suicide, Homicide

Reported by Banner of Liberty Liberty town

Address 11-3

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Frederick Stiles

Certificate of Death

Died at Town Frederick County Frederick MARYLAND

Date 1898 Month 10 Day 2 | Age Y. 63 M. D. | Native of | Occupation

Male ~~Female~~ White ~~Colored~~ Married Single Widow Widower Divorced Number of children living

Husband of Wife

Father's Name

Mother's Name

Cause of Death { Primary 161 Immediate

How long sick

Accident, Suicide, Homicide

Reported by Banner of Liberty 10-6

Address Liberty, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 58089

Name in Full Thomas L. Winfield

Certificate of Death

Died at Town near Middletown County Frederick MARYLAND

Date 1898 Month 10 Day 11 Age nearly 75 Y. M. D. Native of Occupation

Male White Married Widow Divorced

~~Female~~ ~~Colored~~ Single Widower Number of children living

Husband of Wife

Father's Name Mother's Name

Cause of Death Primary 161 How long sick

Immediate Accident, Suicide, Homicide

Reported by Banner of Liberty Libertytown

Address 10-20

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name in Full Miss Marah Young

Certificate of Death

Died at Town Frederick County Fred'k MARYLAND

Date 1898 Month Oct Day 7 Age Y. 63 M. D. Native of Fred'k Occupation

~~Male~~ White ~~Married~~ Widow Divorced

Female ~~Colored~~ Single Widower Number of children living

Husband of Wife

Father's Name Nat Kneaver Mother's Name

Cause of Death Primary Brights Disease 97 How long sick About 18 Mos.

Immediate Uraemia. Accident, Suicide, Homicide

Reported by W. T. McCann

Address Frederick Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full John D. Zounkins

Certificate of Death

Died at Town Middletown County Frederick MARYLAND

Date 189 8 Month 10 Day 13 Age Y. 25 M. D. Native of Occupation

Male White Married Widow Divorced

~~Female~~ ~~Colored~~ Single Widower Number of children living

Husband of Wife

Father's Name Mother's Name 57

Cause of Death Primary Heart trouble How long sick

Immediate Accident, Suicide, Homicide

Reported by Banner of Liberty Libertytown

Address 10-20

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968